

Wisconsin Medicaid update and BadgerCare

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Wisconsin Medicaid and BadgerCare Information for Providers

To:
Nursing Homes
HMOs and Other
Managed Care
Programs

Nursing homes may bill Wisconsin Medicaid for influenza and pneumonia immunizations

This Update summarizes the way nursing homes should bill for influenza and pneumonia immunizations. Nursing homes are encouraged to administer influenza and pneumonia immunizations to all Medicaid recipients and to bill Medicaid for these immunizations. Residents of nursing homes are at risk of contracting influenza and pneumonia and should receive the flu shot this year.

Billing procedure for immunizations

Nursing homes should follow the guidelines listed below when billing for influenza and pneumonia immunizations:

- If nursing home residents are dually eligible for Medicare and Medicaid or have other insurance, bill Medicare or the other insurance first.
- When billing Medicaid, the nursing home should bill only the cost of the drug. No separate administration fee can be added since nursing home staff administers the immunizations and Medicaid already covers this administration cost under the nursing home daily rate.
- The nursing home should purchase the immunizations from a pharmacy, then bill Wisconsin Medicaid for the cost of each individual recipient dose administered.

There are two ways to determine the amount you should bill Medicaid:

1. If the immunization comes in a multi-dose vial, calculate the cost of each individual dose. The nursing home then bills Medicaid for each individual Medicaid recipient receiving the immunization.
2. If you are using a single-dose package, bill Medicaid for the cost of the drug.

Submitting claims

Immunizations are separately billable using the *Current Procedural Terminology* (CPT) codes 90659, type of service (TOS) 1, for influenza and 90732, TOS 1, for pneumonia. Submit charges for these immunizations on the HCFA 1500 claim form. Follow the completion instructions given in Appendix 3 of the Nursing Home Handbook, with the following exceptions:

- Enter the claim sort indicator "P" in Element 1.
- Indicate TOS "1" in Element 24c.
- Leave Element 24d blank.

This *Update* applies to fee-for-service Medicaid providers only. If you are a Medicaid HMO network provider, contact your managed care organization for more information about its billing procedures. Wisconsin Medicaid HMOs are required to provide at least the same benefits for enrollees as those provided under fee-for-service arrangements.

The *Wisconsin Medicaid and BadgerCare Update* is the first source of program policy and billing information for providers.

Although the *Update* refers to Medicaid recipients, all information applies to BadgerCare recipients also.

Wisconsin Medicaid and BadgerCare are administered by the Division of Health Care Financing, Wisconsin Department of Health and Family Services, P.O. Box 309, Madison, WI 53701-0309.

For questions, call Provider Services at (800) 947-9627 or (608) 221-9883 or visit our Web site at www.dhfs.state.wi.us/medicaid/.